

Statement of Organization CANDIDATE

Commonwealth of Virginia CITY OF ALEXANDRIA JUL 1 3 2012

☐ New Candidate

Amended Statement BRAL BOARD

*Please read instructions before completing this form.

| Campaign Committee's Mailing Address | | | | |
|--|---|---|------------------|--|
| | Brookbank For Better Schools | | | |
| Campaign Committee's Mailing Address | Name of Candidate Campaign Committee | | | |
| | School Board "I | 3" Independent | - Nov 6, 2012 | |
| | Office Sought District | (if one) Political Party | Date of Election | |
| | | Place | | |
| | Street Address/PO Box | Suite # | | |
| | Alexandria V | A 22304 | | |
| | brookbank 4 betterschools@gnaid.com 703-823-3288 | | | |
| | Email Address Daytime Phone # | | | |
| Candidate's Information | | | | |
| Candidate | Brookbank | Michael | | |
| | Mr./Ms. Last Name | First Name | | |
| | 3729 Templeto | N Place | | |
| Information | Residence Address | Suite# | | |
| | Alexandria V | A 22304 | | |
| | | | County or City | |
| | Email Address | Schools @ gmal + com | 703-823-328 | |
| National Average | Email Address County or City County or City County or City County or City Daytime Phone # Treasurer Information | | | |
| | Brookbank | Michael | | |
| Treasurer's | Mr. /Ms. Last Name | First Name | | |
| | 3729 Templeton | Place | | |
| Name and Address | Residence Address | Suite # | | |
| and Address | Alexandria VA | 22304 | | |
| | City | State Zip | County or City | |
| | brookbank 4 betterschools@ amail . com 703-823-3288 Email Address Daytime Phone # | | | |
| Campaign Depository | | | | |
| Wells Farge | | | | |
| 3624 King Street | | | | |
| Alexandria, VA 22302 | | | | |
| Primary Financial Institution and Address | | Secondary Financial Institution and Address (if applicable) | | |



Statement of Organization CANDIDATE

| Signatures | | | |
|--------------------------------|--|--|--|
| Candidate's Signature | I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the Code of Virginia). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the Code of Virginia. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. Candidate's Signature Lagrander Lagrander | | |
| Treasurer's Signature | I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the Code of Virginia). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the Code of Virginia for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. Treasurer's Signature Date | | |
| Filing Method | | | |
| | □ Electronic Filer - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports to the State Board of Elections by electronic means. I agree that if at anytime the campaign committee does not intend to file electronically, that I will submit an amended Statement of Organization stating such. □ I intend to electronically file using Virginia's VAFiling Program. □ I intend to use an SBE Approved Vendor | | |
| Electronic Filing Agreement | (Please Enter Name of Vendor) | | |
| | Signature Date | | |
| | Paper Filer - I, as treasurer of this campaign committee, intend to file all required campaign financial disclosure reports on paper. I agree that if at any time the campaign committee does not intend to file on paper, that I must submit an amended Statement of Organization stating such. Signature Date | | |